Application or Docket Number

PATENT APPLICATION . . . DETERMINATION RECORD

Effective October 1, 2001

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1 1	Fi 10	d	11
10-	1118	10	210
10	0/1/	(61	

CLAIMS AS FILED - PART I							-		70		17 6000	-4-1
CLAIIVIS A			(Column 1) (Column 2)				SMALL ENTITY			OTHER THAN		
TOTAL CLAIMS		· (coldina)	'.'/	Will and state of the country	(1) (2)		TYPE [T	OR •		ENTITY	
FOR							•	RATE	FEE	4	RATE	FEE
			NUMBER FILED NUMB		SER EXTRA		BASIC FEE	370.00	OR	BASIC FEE	₹ 740.00	
TOTAL CHARGEABLE CLAIMS			3 /minus 20= *		//		X\$ 9=		OR	X\$18=	198	
INDEPENDENT CLAIMS			/ minus 3 = *				X42=		OR	X84=	170	
MULTIPLE DEPENDENT CLAIM PRESENT								.140	-	1 1		
* If the difference in column 1 is less than zero, enter "0" in column 2					column 2		+140=		OR	+280=	- 40	
CLAIMS AS AMENDED - PART II								TOTAL	<u></u>	OR	TOTAL	1088
70 1					(Column 3)		SMALL	ENTITY	OR	OTHER SMALL I		
	3	CLAIMS	The Carlot	HIGH	EST	(Coldinii 3)				7	OMALL	, , , , , , , , , , , , , , , , , , ,
AMENDMENT A		REMAINING AFTER AMENDMENT		NUM PREVIO PAID	OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=	165	OR	X\$18=	
AMI	Independent	*	Minus	***		=		X42=		OR	X84=	
<u> </u>	FIRST PRESE	NTATION OF M	JLTIPLE DEF	PENDENT	CLAIM		l					
								+140=		OR	+280=	-
·							,	TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	
	CONTRACTOR OF THE SECOND	(Column 1)	Factor of the end for	(Colur		(Column 3)						
AMENDMENT B		REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
Ž	Total	*	Minus	##		=		X\$ 9=		OR	X\$18=	, , , , ,
AME	Independent	*	Minus	***		=	ł	X42=	··		X84=	
	FIRST PRESE	NTATION OF MU	JLTIPLE DEF	ENDENT	CLAIM		ŀ	742-		OR	A04=	
								+140=		OR	+280=	/
		· · ·					4	TOTAL ADDIT, FEE		OR	TOTAL ADDIT. FEE	
		(Column 1)		(Colur		(Column 3)						
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUMI PREVIO PAID	BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
AM	Independent	*	Minus	***		=		X42=		OR	X84=	
	LIUS I PUESE	NTATION OF MU	JUIPLE DEF	ENDENT	CLAIM		ŀ					
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.							L	+140=		OR	+280=	
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.												
	ine Hignest Num	iber Previously Pai	d For" (Total or	Independe	ent) is the	highest number	fou	nd in the app	ropriate box	k in col	ımn 1.	